Application Data Sheet Application Information

Application number::		
Filing Date::		
Application Type::	Regular	
Subject Matter::	Utility	
Suggested classification::		
Suggested Group Art Unit::		
CD-ROM or CD-R?::	None	
Number of CD disks::		
Number of copies of CDs::		
Sequence submission?::	Paper [.]	
Computer Readable Form (CRF)?::		
Number of copies of CFR::		
Title::	REMOTE AUDIO DEVICE MANAGEMENT	
	SYSTEM	
Attorney Docket Number::	FXPL-1064US0	
Request for Early Publication?::	No	
Request for Non-Publication?::	No	
Suggested Drawing Figure::	4	
Total Drawing Sheets::	14	
Small Entity?::	No	
Latin name::		
Variety denomination name::		
Petition included?::	No	
Petition Type::		
Licensed US Govt. Agency::		

Secrecy Order in Parent Appl.?::	No
Applicant Information	
	i .
Applicant Authority Type::	Inventor
Primary Citizenship	China
Country::	
Status::	Full Capacity
Given Name::	Qiong
Middle Name::	
Family Name::	Liu
Name Suffix::	
City of Residence::	Milpitas
State or Province of Residence::	CA ·
Country of Residence::	US
Street of mailing address::	44 Jacklin Place
City of mailing address::	Milpitas
State or Province of mailing address::	CA
Country of mailing address::	US
Postal or Zip Code of mailing address::	95035
Applicant Authority Type::	Inventor
Primary Citizenship	US
Country::	
Status::	Full Capacity
Given Name::	Donald
Middle Name::	

Contract or Grant Numbers::

Family Name:: Kimber

Name Suffix::

City of Residence:: Montara

State or Province of Residence:: CA

Country of Residence:: US

Street of mailing address:: 315 10th Street

City of mailing address:: Montara

State or Province of mailing address:: CA

Country of mailing address:: US

Postal or Zip Code of mailing address:: 94037-1442

Applicant Authority Type:: Inventor

Primary Citizenship US

Country::

Status:: Full Capacity

Given Name:: Jonathan

Middle Name:: T.

Family Name:: Foote

Name Suffix::

City of Residence:: Menlo Park

State or Province of Residence:: CA

Country of Residence::

Street of mailing address:: 450 Laurel Street

City of mailing address::

Menlo Park

State or Province of mailing address:: CA

Country of mailing address:: US

Postal or Zip Code of mailing address:: 94025

Applicant Authority Type::	Inventor	
Primary Citizenship	China	
Country::		
Status::	Full Capacity	
Given Name::	Chunyuan	
Middle Name::		
Family Name::	Liao	
Name Suffix::		
City of Residence::	Greenbelt	
State or Province of Residence::	MD	
Country of Residence::	US	
Street of mailing address::	9104 Edmonston Court	
	Apt. 302	
City of mailing address::	Greenbelt	
State or Province of mailing address::	MD	
Country of mailing address::	US	
Postal or Zip Code of mailing address::	20770	
Applicant Authority Type::	Inventor	
Primary Citizenship	US	
Country::		
Status::	Full Capacity	
Given Name::	John	
Middle Name::		
Family Name::	Adcock	
Name Suffix::		

Application::	Continuity Type::	Parent Application::	Parent Filing Date::		
Domestic Prio	rity Information				
Representative C	Customer Number::	23910			
Representativ	e Information				
Email address::		SBachmann@f	fdml.com]		
Fax Number::		, ,	(415) 362-2928		
Phone number:: (415		(415) 362-3800	415) 362-3800		
Correspondence Customer Number::		23910	23910		
Corresponder	nce Information				
Postal or Zip Co	de of mailing addres	s:: 94025			
Country of mailin	ng address::	US			
	e of mailing address				
City of mailing a		Menlo Park	434 Laurel Street		
Country of Reside Street of mailing			US		
State or Province			CA		

Foreign Priority Information

Country::	Application Number::	Filing Date::	Priority Claimed::

Assignee Information

Assignee Name::

Street of mailing address::

City of mailing address::

State or Province of mailing address::

Country of mailing address::

Postal or Zip Code of mailing address::